

# Ohio EPA - Daily Discharge Monitoring Report - Form 4500

**SUBMISSION ID:**  
**FACILITY:**  
**LOCATION:**

H2-Oh-Yeah  
2134 C.R. 224  
Ashley, OH 43003  
Morrow  
CDO

**STATUS:**  
**PERMIT NUMBER:**  
**STATION CODE:**  
**MONITORING PERIOD :**

Draft  
**4MP00028\*AM**  
401  
**2020-09-01 To: 2020-09-30**

**COUNTY:**  
**DISTRICT:**

**REPORTING LAB:**  
**ANALYST:**  
**NO DISCHARGE INDICATOR:**

**AL**

PARAMETER	pH	Nitrogen, Ammonia (NH3)	Nitrite Plus Nitrate, Total	Nitrogen, Inorganic, Total	Phosphorus, Total (P)	E. coli	Application Rate- Wastewater, Spray
PARAMETER CODE	00400	00610	00630	00640	00665	31648	50045
UNITS	S.U.	mg/l	mg/l	mg/l	mg/l	#/100 ml	inches/day
FREQUENCY	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Total
2020-09-01							
2020-09-02							
2020-09-03							
2020-09-04							
2020-09-05							
2020-09-06							
2020-09-07							
2020-09-08							
2020-09-09							
2020-09-10							
2020-09-11							
2020-09-12							
2020-09-13							
2020-09-14							
2020-09-15							
2020-09-16							
2020-09-17							
2020-09-18							
2020-09-19							
2020-09-20							
2020-09-21							
2020-09-22							
2020-09-23							
2020-09-24							
2020-09-25							
2020-09-26							
2020-09-27							
2020-09-28							
2020-09-29							
2020-09-30							
Minimum							
Maximum							
Average							
Count							
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.				Signature of Responsible Official or Authorized Representative		Submission Date/Time
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**4MP00028\*AM**

401

**2020-09-01 To: 2020-09-30**

**REPORTING LAB:**

**ANALYST:**

**NO DISCHARGE INDICATOR:**

**AL**

PARAMETER	Flow Rate					
PARAMETER CODE	50050					
UNITS	MGD					
FREQUENCY	When Disch.					
SAMPLING TYPE	24hr Total Estimate					
2020-09-01						
2020-09-02						
2020-09-03						
2020-09-04						
2020-09-05						
2020-09-06						
2020-09-07						
2020-09-08						
2020-09-09						
2020-09-10						
2020-09-11						
2020-09-12						
2020-09-13						
2020-09-14						
2020-09-15						
2020-09-16						
2020-09-17						
2020-09-18						
2020-09-19						
2020-09-20						
2020-09-21						
2020-09-22						
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2020-09-24						
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Average						
Count						
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**4MP00028\*AM**

402

**2020-09-01 To: 2020-09-30**

**REPORTING LAB:**

**ANALYST:**

**NO DISCHARGE INDICATOR:**

Brookeside

Kari Long

PARAMETER	pH	Nitrogen, Ammonia (NH3)	Nitrite Plus Nitrate, Total	Nitrogen, Inorganic, Total	Phosphorus, Total (P)	E. coli	Application Rate- Wastewater, Spray
PARAMETER CODE	00400	00610	00630	00640	00665	31648	50045
UNITS	S.U.	mg/l	mg/l	mg/l	mg/l	#/100 ml	inches/day
FREQUENCY	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Grab
2020-09-01							
2020-09-02							
2020-09-03							
2020-09-04							
2020-09-05							
2020-09-06							
2020-09-07							
2020-09-08							
2020-09-09							
2020-09-10	7.81	.0356	AA5.0	AA5.0	21413.67	371.06	.20
2020-09-11	7.85	AA5.0	AA5.0	AA5.0	21334.66	89.45	.20
2020-09-12							
2020-09-13							
2020-09-14	7.86	AA5.0	AA5.0	AA5.0	21173.86	88.46	.20
2020-09-15	7.91	0.066	AA5.0	AA5.0	21669.95	178.63	.20
2020-09-16	7.81	.0413	AA5.0	AA5.0	20080.00	135.00	.20
2020-09-17							
2020-09-18	7.75	.0348	AA5.0	AA5.0	20500.00	129.00	.20
2020-09-19	7.74	.0428	AA5.0	AA5.0	21160.00	126.00	.20
2020-09-20							
2020-09-21	7.71	.0419	AA5.0	AA5.0	22100.00	127.00	.20
2020-09-22	7.74	.0446	AA5.0	AA5.0	22940.00	127.00	.20
2020-09-23	7.78	.0448	AA5.0	AA5.0	22560.00	126.00	.20
2020-09-24							
2020-09-25							
2020-09-26							
2020-09-27							
2020-09-28							
2020-09-29							
2020-09-30							
Minimum	7.71	0.0	0.0	0.0	20080.0	88.46	0.2
Maximum	7.91	0.066	0.0	0.0	22940.0	371.06	0.2
Average		0.03518	0	0	21493.214	149.76	0.2
Count	10	10	10	10	10	10	10
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
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**ANALYST:**

**NO DISCHARGE INDICATOR:**

Brookeside

Kari Long

PARAMETER	Flow Rate					
PARAMETER CODE	50050					
UNITS	MGD					
FREQUENCY	When Disch.					
SAMPLING TYPE	24hr Total Estimate					
2020-09-01						
2020-09-02						
2020-09-03						
2020-09-04						
2020-09-05						
2020-09-06						
2020-09-07						
2020-09-08						
2020-09-09						
2020-09-10	.108					
2020-09-11	.108					
2020-09-12						
2020-09-13						
2020-09-14	.108					
2020-09-15	.108					
2020-09-16	.108					
2020-09-17						
2020-09-18	.108					
2020-09-19	.108					
2020-09-20						
2020-09-21	.108					
2020-09-22	.108					
2020-09-23	.108					
2020-09-24						
2020-09-25						
2020-09-26						
2020-09-27						
2020-09-28						
2020-09-29						
2020-09-30						
Minimum	0.108					
Maximum	0.108					
Average	0.108					
Count	10					
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative	Submission Date/Time	
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403

**2020-09-01 To: 2020-09-30**

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**ANALYST:**

**NO DISCHARGE INDICATOR:**

PARAMETER	pH	Nitrogen, Ammonia (NH3)	Nitrite Plus Nitrate, Total	Nitrogen, Inorganic, Total	Phosphorus, Total (P)	E. coli	Application Rate- Wastewater, Spray
PARAMETER CODE	00400	00610	00630	00640	00665	31648	50045
UNITS	S.U.	mg/l	mg/l	mg/l	mg/l	#/100 ml	inches/day
FREQUENCY	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.	When Disch.
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Grab
2020-09-01							
2020-09-02							
2020-09-03							
2020-09-04							
2020-09-05							
2020-09-06							
2020-09-07							
2020-09-08							
2020-09-09							
2020-09-10							
2020-09-11							
2020-09-12							
2020-09-13							
2020-09-14							
2020-09-15							
2020-09-16							
2020-09-17							
2020-09-18							
2020-09-19							
2020-09-20							
2020-09-21							
2020-09-22							
2020-09-23							
2020-09-24							
2020-09-25							
2020-09-26							
2020-09-27							
2020-09-28							
2020-09-29							
2020-09-30							
Minimum							
Maximum							
Average							
Count							
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**NO DISCHARGE INDICATOR:**

PARAMETER	Flow Rate					
PARAMETER CODE	50050					
UNITS	MGD					
FREQUENCY	When Disch.					
SAMPLING TYPE	24hr Total Estimate					
2020-09-01						
2020-09-02						
2020-09-03						
2020-09-04						
2020-09-05						
2020-09-06						
2020-09-07						
2020-09-08						
2020-09-09						
2020-09-10						
2020-09-11						
2020-09-12						
2020-09-13						
2020-09-14						
2020-09-15						
2020-09-16						
2020-09-17						
2020-09-18						
2020-09-19						
2020-09-20						
2020-09-21						
2020-09-22						
2020-09-23						
2020-09-24						
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2020-09-29						
2020-09-30						
Minimum						
Maximum						
Average						
Count						
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**4MP00028\*AM**

602

**2020-09-01 To: 2020-09-30**

**REPORTING LAB:**

**ANALYST:**

**NO DISCHARGE INDICATOR:**

Brookeside

Kari Long

PARAMETER	Biochemical Oxygen Demand, 5 Day	Total Suspended Solids	Nitrogen, Ammonia (NH3)	Phosphorus, Total (P)	E. coli	Flow Rate	Sludge Solids, Percent Total
PARAMETER CODE	00310	00530	00610	00665	31648	50050	70318
UNITS	mg/l	mg/l	mg/l	mg/l	#/100 ml	MGD	%
FREQUENCY	1/Week	1/Week	1 / 2 Weeks	1 / 2 Weeks	1 / 2 Weeks	1 / 2 Weeks	1 / 2 Weeks
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	24hr Total Estimate	Grab
2020-09-01							
2020-09-02							
2020-09-03							
2020-09-04							
2020-09-05							
2020-09-06							
2020-09-07	7.790	.5500	AA5.0	20.9400	.1564	.0200	.6390
2020-09-08							
2020-09-09							
2020-09-10							
2020-09-11							
2020-09-12							
2020-09-13							
2020-09-14	7.790	.9000					
2020-09-15							
2020-09-16							
2020-09-17							
2020-09-18							
2020-09-19							
2020-09-20							
2020-09-21	7.790	.6800	AA5.0	23.8541	.1560	.0200	.6400
2020-09-22							
2020-09-23							
2020-09-24							
2020-09-25							
2020-09-26							
2020-09-27							
2020-09-28	7.790	.7200					
2020-09-29							
2020-09-30							
Minimum	7.79	0.55	0.0	20.94	0.156	0.02	0.639
Maximum	7.79	0.9	0.0	23.8541	0.1564	0.02	0.64
Average	7.79	0.7125	0	22.39705	0.1562	0.02	0.6395
Count	4	4	2	2	2	2	2
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
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Draft

**4MP00028\*AM**

602

**2020-09-01 To: 2020-09-30**

**REPORTING LAB:**

**ANALYST:**

**NO DISCHARGE INDICATOR:**

Brookeside

Kari Long

PARAMETER	Sludge Solids, Percent Volatile	Freeboard	pH	Oil and Grease, Hexane Extr Method	Nitrogen Kjeldahl, Total	Nitrogen, Inorganic, Total	Fluoride, Total (F)
PARAMETER CODE	70322	82564	00400	00552	00625	00640	00951
UNITS	%	feet	S.U.	mg/l	mg/l	mg/l	mg/l
FREQUENCY	1 / 2 Weeks	1 / 2 Weeks	1/Month	1/Month	1/Month	1/Month	1/Year
SAMPLING TYPE	Grab	Total	Grab	Grab	Grab	Grab	Grab
2020-09-01							
2020-09-02							
2020-09-03							
2020-09-04							
2020-09-05							
2020-09-06							
2020-09-07	7662.64	2	7.7900	.0379	.0000	.0000	
2020-09-08							
2020-09-09							
2020-09-10							
2020-09-11							
2020-09-12							
2020-09-13							
2020-09-14							
2020-09-15							
2020-09-16							
2020-09-17							
2020-09-18							
2020-09-19							
2020-09-20							
2020-09-21	1399.82	2					
2020-09-22							
2020-09-23							
2020-09-24							
2020-09-25							
2020-09-26							
2020-09-27							
2020-09-28							
2020-09-29							
2020-09-30							
Minimum	1399.82	2.0	7.79	0.0379	0.0	0.0	
Maximum	7662.64	2.0	7.79	0.0379	0.0	0.0	
Average	4531.23	2		0.0379	0	0	
Count	2	2	1	1	1	1	
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
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**REPORTING LAB:**

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**NO DISCHARGE INDICATOR:**

Brookeside

Kari Long

PARAMETER	Arsenic, Total (As)	Beryllium, Total	Boron, Total	Cobalt, Total (Co)	Iron, Total (Fe)	Manganese, Total (Mn)	Molybdenum (Mo)
PARAMETER CODE	01002	01012	01022	01037	01045	01055	01062
UNITS	ug/l	ug/l	ug/l	ug/l	ug/l	ug/l	ug/l
FREQUENCY	1/Year	1/Year	1/Year	1/Year	1/Year	1/Year	1/Year
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Grab
2020-09-01							
2020-09-02							
2020-09-03							
2020-09-04							
2020-09-05							
2020-09-06							
2020-09-07							
2020-09-08							
2020-09-09							
2020-09-10							
2020-09-11							
2020-09-12							
2020-09-13							
2020-09-14							
2020-09-15							
2020-09-16							
2020-09-17							
2020-09-18							
2020-09-19							
2020-09-20							
2020-09-21							
2020-09-22							
2020-09-23							
2020-09-24							
2020-09-25							
2020-09-26							
2020-09-27							
2020-09-28							
2020-09-29							
2020-09-30							
Minimum							
Maximum							
Average							
Count							
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602

**2020-09-01 To: 2020-09-30**

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**ANALYST:**

**NO DISCHARGE INDICATOR:**

Brookeside

Kari Long

PARAMETER	Nickel, Total Recoverable	Vanadium, Total (V)	Zinc, Total Recoverable	Aluminium, Total (Al)	Cadmium, Total Recoverable	Lead, Total Recoverable	Chromium, Total Recoverable
PARAMETER CODE	01074	01087	01094	01105	01113	01114	01118
UNITS	ug/l	ug/l	ug/l	ug/l	ug/l	ug/l	ug/l
FREQUENCY	1/Year	1/Year	1/Year	1/Year	1/Year	1/Year	1/Year
SAMPLING TYPE	Grab	Grab	Grab	Grab	Grab	Grab	Grab
2020-09-01							
2020-09-02							
2020-09-03							
2020-09-04							
2020-09-05							
2020-09-06							
2020-09-07							
2020-09-08							
2020-09-09							
2020-09-10							
2020-09-11							
2020-09-12							
2020-09-13							
2020-09-14							
2020-09-15							
2020-09-16							
2020-09-17							
2020-09-18							
2020-09-19							
2020-09-20							
2020-09-21							
2020-09-22							
2020-09-23							
2020-09-24							
2020-09-25							
2020-09-26							
2020-09-27							
2020-09-28							
2020-09-29							
2020-09-30							
Minimum							
Maximum							
Average							
Count							
Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			Signature of Responsible Official or Authorized Representative		Submission Date/Time	
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602

**2020-09-01 To: 2020-09-30**

**REPORTING LAB:**

**ANALYST:**

**NO DISCHARGE INDICATOR:**

Brookeside

Kari Long

PARAMETER	Copper, Total Recoverable	Lithium, Total (Li)	Selenium, Total (Se)				
PARAMETER CODE	01119	01132	01147				
UNITS	ug/l	ug/l	ug/l				
FREQUENCY	1/Year	1/Year	1/Year				
SAMPLING TYPE	Grab	Grab	Grab				
2020-09-01							
2020-09-02							
2020-09-03							
2020-09-04							
2020-09-05							
2020-09-06							
2020-09-07							
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2020-09-29							
2020-09-30							
Minimum							
Maximum							
Average							
Count							
<b>Name of Responsible Official or Authorized Representative</b>	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.			<b>Signature of Responsible Official or Authorized Representative</b>		<b>Submission Date/Time</b>	
						<b>Certification Version Date</b>	

# Ohio EPA - Daily Discharge Monitoring Report - Form 4500

**FACILITY:**  
**LOCATION:**

H2-Oh-Yeah  
2134 C.R. 224  
Ashley, OH 43003

**PERMIT NUMBER:**  
**MONITORING PERIOD :**

**4MP00028\*AM**  
**2020-09-01 To: 2020-09-30**

## GENERAL REPORT COMMENT:

Missing the 1 time per year samples we will update them next month. sorry for any inconvenience.

## PARAMETER COMMENTS:

Station Code	Parameter Name	Parameter Code	Date	Unit	Comment
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